California Department of Corrections and Rehabilitation

Community Resource Directory Form

CEO/EXECUTIVE NAME:	YEAR FOUNDED:
ORGANIZATION:	
ADDRESS:	
CITY:	STATE: ZIP CODE:
WEB ADDRESS:	
CONTACT PERSON:	EMAIL ADDRESS:
PHONE:	FAX NUMBER:
NO. OF EMPLOYEES/VOLUNTE	CERS:
REGION(S) SERVED	
☐Bay Area	☐ Riverside County
□Central CA	☐ San Bernardino County
□Los Angeles	☐ San Diego County
□Northern CA	☐ Orange County
□Statewide	□Nationwide
☐ Other (specify):	
SERVICE(S) PROVIDED:	
☐ Educational	□ Mentoring
☐ Faith-Based	☐ Substance Abuse
☐ Family Support/Counseling	☐ Transitional (e.g. halfway house)
☐ Health Care	☐ Victim Services
☐ Housing	□Vocational
☐ Inmate / Ward	☐ Job Placement
☐ Mental Health Care	☐ Law Enforcement
☐ Other (specify):	